



We plan to highlight the great things our young volunteers accomplish each year. Please sign below if your child has permission to be videotaped or photographed, for  $H_2O$ 's annual slide show and/or other media outlets, ie the city's website, online publications, Lakewood newspapers, etc.

12650 Detroit Avenue Lakewood, Ohio 44107 Tel (216) 529-6030 Fax (216) 228-2514

## PHOTOGRAPHY RELEASE

I (we) hereby give the City of Lakewood permission and authority, with respect to the photograph(s), videotape(s), or other recording(s) of my (our) child(ren), to copyright, use, publish, advertise and share with other organizations affiliated with the H2O program or news media the same in any medium and for any purpose, without any compensation to me (us), my (our) child(ren), my (our) (their) successors, heirs, and/or assigns, and to use my (our) child's(ren's) name in connection therewith.

I (we) also give my(our) permission for the City of Lakewood, any organization affiliated with the H2O program and any news media to retain the original or copies of these photographs, videotapes, or other recordings to use as they deem appropriate without any compensation to me (us), my (our) child(ren), my (our) (their) successors, heirs, and/or assigns.

I (we) further hereby release and discharge the City of Lakewood, any organization affiliated with the H2O program and news media with whom the photos are shared, as well as the photographer or recorder from any and all claims and demands arising out of or in connection with the use of the photograph(s), videotape(s), or other recording(s).

Child's name (please print)	
1 /	
Parent/Guardian's signature	Date